

400 R STREET, SACRAMENTO, CALIFORNIA 95814-6200



DRAFT MINUTES

Task Force on Culturally and Linguistically
Competent Physicians and Dentists
Quarterly Meeting
400 R Street, Suite 3020
Sacramento, CA 95814
January 8, 2002
1:30 p.m. - 4:30 p.m.

Task Force Members Present:

Kathleen Hamilton, Director, Department of Consumer Affairs, Co-Chair David Carlisle, M.D., Ph.D., Director, Office of Statewide Health Planning and Development Rini Chakaborty, California Immigrant Welfare
Anil Chawla, M.D., M.D., Clinicas del Camino Real
Albert Gaw, M.D., Medical Director, Mental Health Rehabilitation Facility
Ron Joseph, Executive Director, Medical Board of California
Aliza Lifshitz, M.D., California Hispanic-American Association
Earl Lui, Attorney, Consumers Union
Lia Margolis, Executive Director, Latino Coalition for a Healthy California
Martin Martinez, California Pan-Ethnic Health Network
Arnoldo Torres, Executive Director, California Hispanic Health Care Association
Eva Vasquez-Camacho, United Farm Workers
Doreena Wong, Staff Attorney, National Health Law Program

Staff Members Present:

Kristy Wiese, Assistant Deputy Director, Department of Consumer Affairs Jean Iacino, Special Assistant to the Director, Department of Health Services Greg Franklin, Chief, Office of Multi Cultural Health, Department of Health Services Anita Scuri, Legal Counsel, Department of Consumer Affairs

Call to Order - Establish a Quorum:

The meeting was called to order at 1:48 p.m., by Kathleen Hamilton, Director of the Department of Consumer Affairs (DCA). All Task Force Members present introduced themselves. Noticing the absence of a quorum the Task Force convened as a subcommittee.

Opening comments from co-chair, Director Hamilton:

Director Hamilton asked Ms. Scuri to clarify questions raised by Mr. Torres regarding the noticing requirements for the Task Force to meet with organizations to discuss Task Force business.

Ms. Scuri responded that effective January 2002 legislation was passed that affected the Bagley-Keene Open Meetings Act. The Bagley-Keene Act applies to any congregation of a majority of the members as a state body at the same time and place to hear, discuss, or deliberate on subjects

that would be on their agenda. It also includes any use of direct communication, personal intermediary or technological devices that a majority of them would employ; additionally, a meeting where present, seriatim, or a rotating meeting where a majority of members would be present. Members may meet without an agenda with individuals who are not on the Task Force and then bring that information to the Task Force as a whole body.

Mr. Torres asked for further clarification on making the appropriate noticing requirements for less than a majority of the members who want to participate in community consultations.

Ms. Scuri explained that the Task Force is chaired officially by the Department of Consumer Affairs and the Department of Health Services; therefore, an approved agenda should be submitted to the State agency rather than an agenda prepared by someone in a private capacity.

Director Hamilton related that the Department would facilitate the public noticing requirements. She pointed out that if there is a need to conduct additional meetings, then members should consult with DCA and DHS.

Director Hamilton requested Dr. Carlisle introduce the new deputy director of OSHPD. Dr. Carlisle introduced the newly appointed Deputy Director, Pablo Rosales of the Work Force and Community Development Division of the Office of Statewide Health Planning Division, (OSHPD).

Mr. Rosales advised he will be supervising the Health Care Work Force and shared his goals and perspective for the role of that division.

Review and Approve Minutes from the July 10, 2001 Task Force Meeting (Action)

Director Hamilton asked for review and approval of the minutes from the September 28, 2001 and the October 2, 2001 meetings. The motion to approve the minutes were made by Gaw and seconded by Joseph and unanimously approved.

Ms. Wong expressed a desire for additional time to review the minutes. Ms. Scuri advised that since a quorum was not present, the Task Force was only making a recommendation to the full Task Force. In the interim, additional changes could be made until a quorum was established.

Status Reports from Working Groups:

Director Hamilton requested that Mr. Joseph provide an update on the Continuing Education and the Cultural Competency Certification working group meetings. Mr. Joseph advised that the working groups had been combined to facilitate discussion. Members discussed whether certification should be achieved on a voluntary or mandatory basis. Mr. Joseph advised that the working group discussed incentives vs. mandates to encourage the attainment of competency by physicians and dentists. Members also expressed an interest in comparing the national survey regarding competency standards that have been implemented. In addition, the working group

will issue a report relative to certification and CME credits to retain certification. The general purpose and intent for the initial meetings were to establish guidelines for future meetings.

Task Force members discussed the need for having frequent progress reports from the working groups to update members on current Task Force issues. Dr. Gaw suggested distributing a one page executive summary in addition to the minutes that summarizes the minutes. He stated that would enable the Task Force to meet its projected goal for the submittal of the final report to the Legislature. Dr. Gaw asked about the legality in circulating the minutes via e-mail.

Ms. Scuri advised that the guidelines in the Bagley-Keene Act must be adhered to even when a majority of Task Force members engage in electronically discussing Task Force issues. Even sending minutes for review are subjected to the same public meeting requirements under the Bagley-Keene Act.

Director Hamilton encouraged members to review the minutes prior to the meetings and any additional questions should be posed at the quarterly meetings.

Mr. Torres declared his interest to serve on the Continuing Education and Cultural Competency Certification Working Group and possibly meeting by teleconferencing.

Ms. Scuri advised that the change in the Bagley-Keene Act also applies to meetings conducted by teleconferencing.

Director Hamilton clarified that meeting by teleconferencing under the new statutes must be accessible to the public at all of the participating locations.

Mr. Joseph asked if a summary document prepared by the working groups would constitute a violation. Ms. Scuri advised that information could be collected as long as a majority of the members were not sending their comments. However, comments received on an individual basis do not constitute a violation.

Director Hamilton asked Mr. Franklin to provide an updated report on the Cultural Competency Standards Working Group. Mr. Franklin advised that the Cultural Competency Standards Working Group conducted its initial meeting on November 14, 2001, in Los Angeles. He stated that the working group discussed the current standards, timetables required to the complete the task, and various subsidized training programs. The conclusion was to review the current standards and conduct a thorough assessment that would assist the Task Force in making recommendations.

Ms. Wong advised that there were several good suggestions that came out of the meeting. One was to have more focus groups that included patients, advocates, and stakeholders. Another suggestion was to invite experts to the Subcommittee Working Group or Task Force meetings for their input. This would assist staff in collecting information to develop a matrix to compare and evaluate comprehensive standards.

Mr. Franklin cautioned that this would be a difficult task, because cultural competency healthcare is a new phenomenon and hasn't been embarked upon at any one particular organization.

Dr. Liftshitz advised research has been done in this area and marketing advertising agencies as well as independent studies could provide additional information relative to racial groups, age groups and proficiency in languages.

Dr. Gaw related that the Surgeon General has documentation regarding cultural and linguistic and mental health care. He related this document might be applicable to general medicine.

Director Hamilton advised that she would coordinate with Dr. Bontá to define the assignments for the working groups as well as timeframes that should be considered for submitting recommendations.

Presentation by Jose Ramon Fernandez-Pena, M.D., Director of the San Francisco Bay Area Regional Health Occupations Resource Center and Statewide Coordinator, Welcome Back Project:

Dr. Fernandez-Pena, Welcome Back Program, advised the mission of the program is to build a bridge between the need for linguistically and culturally competent health services in the underserved communities by assessing the training needs of the health sector and identifying internationally trained health workers living in California. The program hopes to provide educational case management services, support participants in obtaining professional licenses, identify existing fast track programs, and provide courses on the U.S. health care system. In addition, Dr. Fernandez-Pena advised he is responsible for a health care interpreter program that works with sixteen community colleges and San Francisco State University. He stated this is the only college-based training program for health care interpreters at community colleges.

Dr. Fernandez-Pena stated nine hundred health professionals have been identified from other countries, including five hundred thirteen physicians, one hundred thirty-seven dentists; one hundred eighty-six nurses and ninety-eight other health care professionals.

Director Hamilton asked Dr. Fernandez-Pena if these health care workers were not working in the healthcare field due to a language barrier or a licensure issue. Dr. Fernandez-Pena remarked it was due to a combination of factors, but mainly a licensure issue.

Dr. Gaw asked if the program's intent was geared towards enabling practitioners to practice as independent physicians and dentists.

Dr. Fernandez-Pena replied the goal was to assist individuals in making their own decisions, but provide the necessary help for them to reenter into the health work force in some capacity.

Director Hamilton asked if Dr. Fernandez-Pena could provide qualitative analysis for the San Francisco Welcome Back Focus Group to share with the Task Force. Dr. Fernandez-Pena advised when that information was available he would forward it to the Task Force.

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Dr. Fernandez-Pena was asked if he could share more about alternative career paths. He related that the pathway consists of a one-on-one relationship with a case manager working with the health care professionals to focus on short-term and long-term goals.

Ms. Wong asked Dr. Fernandez-Pena if they utilized cultural mediators as interpreters. He responded that they train health care interpreters at City College, which act as cultural brokers, patient advocates and communicator bridges.

Mr. Franklin asked if the program has been successful in helping individuals find work in their chosen field.

Dr. Fernandez Pena advised the program has been in existence for nine months and has not been able to place any individuals in their respective fields.

Mr. Torres asked Dr. Fernandez-Pena if health care interpreters should be an ongoing element of the health care delivery system and if the interpreters were a temporary solution or a long-term solution to the health care crisis.

Dr. Fernandez-Pena responded that the health care interpreter program was developed by CHIA. He stated in his opinion there is a need for health care interpreters.

Bob McElderry from the California Medical Association thanked Dr. Fernandez-Pena for his presentation and inquired if the thirty-five physicians identified came to the Welcome Back Program with the required training and education. He also inquired if the vast majority of those individuals were prepared to take the USMLE. Dr. Fernandez-Pena replied that the individuals are at different stages, however, approximately twenty-seven have passed step one, twenty-four have passed step two, and nineteen have passed both step one and step two.

Barbara Stoney, social worker with the Welcome Back Program, replied that the individuals lack clinical experience. There is a disadvantage in matching applicants because many of the participants do not have the required experience in the United States.

Dr. Fernandez-Pena stated some of the individuals would have to take a realistic approach to what opportunities are available because many of them received their medical degrees as early as 1965.

Director Hamilton asked Dr. Fernandez-Pena's thoughts on reactivating the Fifth Pathway Program. Dr. Fernandez-Pena advised that he is not a licensed physician in the U.S., but was licensed in Mexico and that he had considered this program when he first came to the U.S. He thought some individuals might be interested in participating in this program.

Mr. Lui advised there were several departments within the Task Force, the Medical Board and Office Statewide Health Planning Department that could possibly provide assistance to Dr. Fernandez-Pena

Dr. Gaw advised that he is aware of competent and experienced U.S. graduates from top-notch medical schools who are unable to obtain a residency due to the lack of residency slots. Many of these individuals speak foreign languages and have the commitment to work in underserved communities.

Mr. Joseph advised that the Medical Board does not regulate the residency programs and has no control over the number of residency slots or the selection process for admittance into a residency program.

Director Hamilton informed Dr. Fernandez-Pena that the Department has several regulatory programs available that the Welcome Back program might consider utilizing.

Director Hamilton thanked Dr. Fernandez-Pena for his presentation and sharing his information with the Task Force and congratulated the Welcome Back Program on a wonderful start.

Review Draft Recommendations Generated from Public Hearings held in San Diego, Oxnard, San Francisco and Salinas (Action):

The Task Force members reviewed draft recommendations that were compiled from the public hearings and quarterly Task Force meetings.

Director Hamilton mentioned that a possible recommendation is to reinstate the Fifth Pathway program.

Ms. Wong expressed concern for the lack of members who attend the Task Force meetings. She asked staff to reaffirm member participation to ensure establishing quorums for future meetings.

Director Hamilton stated that within the next several months the Task Force would discuss the general process for considering the recommendations that will come from the public hearings and working group meetings. Even though, there has been a high level of interest from Task Force members, a quorum must be established in order to take action on any recommendations received.

Ms. Scuri reemphasized that each group meets as a subcommittee rather than a whole body if a quorum is not established.

The next quarterly meeting will be on April 9th and DCA staff will continue to reaffirm member participation.

Public Comment:

None

Adjournment:

The meeting was adjourned at 4:10 p.m.